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|---|--|------------------------------|---|--|
| No. W 11903 | Due no later than May 31 | | 2. Registered Agent and Office (NOT A P.O. BOX) DAVID H KELLOGG 509 E PINE MCCALL ID 83638 | |
| Return to: | Annual Report Form | | | |
| SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 | 1. Mailing Address: Correct in this box if GRANITE VIEW, LLC DAVID H KELLOGG | needed. 509 E | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | MECALL ID-83638 YEW MEADOWS, 8365 | .∙ Ų 3. <u>New</u> Ro | egistered Agent Signature. | |
| 4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. | | | | |
| Manager or Member Nam | e Street or PO A | ddress City | State Country Postal Code | |
| Manager Member (circle one) | VID H. KELLOGG BOX | 216 NEW MI | EMOOUS Fd. ADAMS 83654 | |
| 5. Organized Under the Laws of | 6. Signature: Wails | 1. Kellogs | Date: 4/25/12 | |
| W 11903 | Name (type or print): OBVI | DH. KELLOGA | Title: Monof | |
| Issued 03/12/2012 by CLH | | | 100478 | |
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